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February 23, 2000

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BOX PATENT APPLICATION

Assistant Commissioner For Patents Washington, D.C. 20231

JONATHAN A. DAVID SHAWN P. FOLEY

File No.:

SONYJP 3.0-103 Higuchi et al.

Inventor(s): Title:

A VIDEO CAMERA AND A WARNING METHOD THEREOF

Dear Sir:

herewith p	please find the following docu	ments in the above-id	lentified application for Letters Patent	of the L	Inited States:
1	Pages of Abstract		Unexecuted Declaration (executed Declaration to follow)		
11 Pages of Specification			One (1) return-addressed postcard		
5 • Number of Claims			PLEASE PROVIDE FILING DATE AND SERIAL NUMBER		
5	Sheets of Drawings 🛛 A4	□ 11"	•		
arge Depo	sit Account No. 12-1095 in th	ne amount of \$690.00	, calculated as follows:		
			•	\$	690.00
Fees:					
Total number of claims (including multiple dependent claims):): 5		
Total nun	nber of claims in excess of 20	0 x \$18			0.00
Number of independent claims: 2					
Number of independent claims minus 3: $0 \times 78					0.00
Fee for m	oultiple dependent claim(s) (\$	3260)			0.00
				-	
TOTAL FI	LING FEE		\$	690.00	
	1 11 5 6 Fees: Total num Number of Number of	1 Pages of Abstract 11 Pages of Specification 5 Number of Claims 5 Sheets of Drawings ☑ A4 arge Deposit Account No. 12-1095 in the Fees: Total number of claims (including multate) Total number of claims in excess of 20 Number of independent claims: Number of independent claims minus	1 Pages of Abstract 11 Pages of Specification 5 Number of Claims 5 Sheets of Drawings ☑ A4 ☐ 11" arge Deposit Account No. 12-1095 in the amount of \$690.00 Fees: Total number of claims (including multiple dependent claims Total number of claims in excess of 20: 0 x \$18 Number of independent claims: 2 Number of independent claims minus 3: 0 x \$78 Fee for multiple dependent claim(s) (\$260)	Unexecuted Declaration (executed Declaration to follow) Pages of Specification One (1) return-addressed postcard Number of Claims PLEASE PROVIDE FILING DATE AND Sheets of Drawings ☑ A4 ☐ 11" Page Deposit Account No. 12-1095 in the amount of \$690.00, calculated as follows: Fees: Total number of claims (including multiple dependent claims): Total number of independent claims: Number of independent claims: Number of independent claims minus 3: Number of independent claims	Pages of Abstract (executed Declaration to follow) Pages of Specification One (1) return-addressed postcard Number of Claims PLEASE PROVIDE FILING DATE AND SERIAL Sheets of Drawings A4 11" Parge Deposit Account No. 12-1095 in the amount of \$690.00, calculated as follows: Fees: Total number of claims (including multiple dependent claims): Total number of claims in excess of 20: Number of independent claims: Number of independent claims minus 3: O x \$78 Fee for multiple dependent claim(s) (\$260)

CONVENTION DATE: February 26, 1999 for Japanese Appln. S.N. P11-051871 is claimed.

Priority Document:

In the event the actual fee is greater than the payment authorized above, the Patent Office is authorized to charge any deficiency to our Deposit Account No. 12-1095.

Respectfully submitted,

ÉRNER, DAVID, LITTENBERG, KRUMHÓLZ & MENTLIK, LLP

ROBERT B. COHEN

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